

ALTOONA AREA SCHOOL DISTRICT

FAX NO. (814) 946-8375



FEB 7 2000

FEB - 7 2000

ECCASD 1001

CC: 96-45

February 2, 2000

Due 5/3/00

BUSINESS OFFICE

1415 SIXTH AVENUE
ALTOONA, PENNSYLVANIA 16602

VIA CERTIFIED FIRST CLASS MAIL

Federal Communications Commission
Office of the Secretary
445 12th Street, S. W.
Room TW-A325
Washington, DC 20554

Ladies and Gentlemen:

I am requesting funding for the District's Year 1 E-Rate applications for internet services and telephone services.

It was my understanding that Forms 470 and 471 had to be filed by April 15, 1998, which we did. I learned later that we did not get a response from the SLC because we did not fulfill the 28-day window.

The District internet and telephone services were both under contract and did not require bidding. It is very unlikely that lower prices could have been attained.

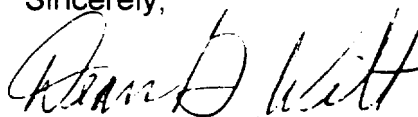
Please reconsider funding these items for Year 1. It would greatly assist in implementing the technology plan for our students.

Contact Information:
Dean G. Wilt
Altoona Area School District
1415 Sixth Avenue
Altoona, PA 16602
Phone: (814) 946-8206
FAX: (814) 946-8375
e-mail: dwilt@aasdcad.com

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Federal Communications
February 2, 2000

Funding Information:
Page 1 from the Form 471's are attached.

Sincerely,

A handwritten signature in black ink, appearing to read "Dean G. Wilt". The signature is fluid and cursive, with the first name "Dean" and last name "Wilt" clearly distinguishable.

Dean G. Wilt
Secretary/Chief Fiscal Officer
(814) 946-8206

CWR

Enclosure

xc: E Rate File 98/99
Pending 3/31/00

1998 ISDN-Certified

Approval by OMB
3060-0806

FCC Form

471

Schools and Libraries Universal Service Services Ordered and Certification Form

File Copy

Estimated Average Burden Hours Per Response: 6 hours

This form asks schools and libraries to list the eligible telecommunications-related services they have ordered and estimate the annual charges for them so that the Schools and Libraries Corporation can set aside sufficient support to reimburse providers for services.

Please read instructions before completing.

(To be completed by each Billed Entity)

Block 1: Applicant Address and Identifications (School, library, or consortium desiring Universal Service funding.)

1. Name of Applicant (Billed Entity) Altoona Area School District		2. Funding Year 1998	
3a. NCES School Code (if individual school) or NCES Library Code (if individual library) 42-02340		3b. Billed Entity Number 125584	
4a. Type of Applicant (Check only one box) <input type="checkbox"/> school <input checked="" type="checkbox"/> school district <input type="checkbox"/> library or library consortium under the LSTA <input type="checkbox"/> consortium of multiple entities		4b. If applicant is a consortium, check all other boxes that apply: <input type="checkbox"/> includes non-government entities ineligible for support <input type="checkbox"/> region of a state <input type="checkbox"/> statewide <input type="checkbox"/> multi-state <input type="checkbox"/> state educational agency <input type="checkbox"/> local educational agency <input type="checkbox"/> educational services agency	
5. Applicant's Street Address, P.O. Box, or Route Number 1415 sixth avenue			
City Altoona	State PA	Zip Code 16602	Telephone Number 814-946-8206
6. Contact Person's Name Dean Wilt			
Street Address, P.O. Box, or Route Number (if different from Item 5)			
City	State	Zip Code	
Fill in all of the following (if available), and check the preferred mode of contact: <input type="checkbox"/> FAX 814-946-8375 <input type="checkbox"/> E-mail dwilt@asasdcac.com <input checked="" type="checkbox"/> Telephone 814-946-8206 <input type="checkbox"/> Mail			

Block 2: Purpose of Request

7 Purpose of Request: (Check all that apply, if any.)

a. ☒ Discount on contract(s) signed prior to a request being posted on the Administrator's website.
Was an FCC Form 470 filed with regard to all the contract(s)? ☒ Yes ☐ No

b. ☐ Discount on contract(s) signed after a request being posted on the Administrator's website.

c. ☐ Minor modifications or supplement to existing contract(s) for which a Form 471 was already filed.
471 Application Number _____

Block 3: Characteristics of Applicant and Applicant's Service Order (derived from FCC Form 470 Blocks 2 & 3)

8a. Number of students 9362	8b. Number of library patrons
9. Number of buildings to be served 19	10. Number of rooms to be served 468

471

Schools and Libraries Universal Service Services Ordered and Certification Form

Approval by OMB
060-0806

Estimated Average Burden Hours Per Response: 6 hours

This form asks schools and libraries to list the eligible telecommunications-related services they have ordered and estimate the annual charges for them so that the Schools and Libraries Corporation can set aside sufficient support to reimburse providers for services.

Please read instructions before completing.

(To be completed by each Billed Entity)

Block 1: Applicant Address and Identifications (School, library, or consortium desiring Universal Service funding.)

1. Name of Applicant (Billed Entity) Altoona Area School District		2. Funding Year 1998	
3a. NCES School Code (if individual school) or NCES Library Code (if individual library) 4202340		3b. 471 Application Number (Administrator will insert this)	
3c. Billed Entry Number 125584			
4a. Type of Applicant (Check only one box) <input type="checkbox"/> school <input checked="" type="checkbox"/> school district <input type="checkbox"/> library or library consortium under the LSTA <input type="checkbox"/> consortium of multiple entities		4b. If applicant is a consortium, check all other boxes that apply: <input type="checkbox"/> includes non-government entities ineligible for support <input type="checkbox"/> state educational agency <input type="checkbox"/> region of a state <input type="checkbox"/> statewide <input type="checkbox"/> multi-state <input type="checkbox"/> local educational agency <input type="checkbox"/> educational services agency	
5. Applicant's Street Address, P.O. Box, or Route Number 1415 sixth avenue			
City Altoona	State PA	Zip Code 16602	Telephone Number 814-946-8206
E-mail Address dwilt@asdcad.com			
6. Contact Person's Name Dean Wilt			
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a. <input checked="" type="checkbox"/> Discount on contract(s) signed prior to a request being posted on the Administrator's website. Was an FCC Form 470 filed with regard to all the contract(s)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
b. <input type="checkbox"/> Discount on contract(s) signed after a request being posted on the Administrator's website.	
c. <input type="checkbox"/> Minor modifications or supplement to existing contract(s) for which a Form 471 was already filed. 471 Application Number _____	

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